PAE AO 239 (10/09) Application to Proceed in District Court Without Prepaying Fees or Costs (Long Form)

## UNITED STATES DISTRICT COURT

for the

Eastern District of Pennsylvania

Ebay M. Williams	)	
Plaintiff/Petitioner	)	
v.	)	Civil Action No.
NCO Francial Systems INC  Defendant/Respondent	)	
Defendant/Respondent	)	

## APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS (Long Form)

## Affidavit in Support of the Application

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested. I declare under penalty of perjury that the information below is true and understand that a false statement may result in a dismissal of my claims.

Signed: Common Library

## **Instructions**

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Date: Nov 30 2016

 For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	Average monthly income amount during the past 12 months			mount expected xt month	
		You	Spouse	You	Spouse
Employment	\$	Ø	\$ NIA	\$ $\phi$	\$ p]A
Self-employment	\$	Ø	\$ NA	\$ Ф	s NA
Income from real property (such as rental income)	\$	Φ	\$ NIA	\$ $\phi$	\$ NA
Interest and dividends	\$	Ď	\$ NIA	\$ Ø	s )) <del> </del>
Gifts	\$	Ø	\$ NA	\$ Ø	\$ 2)
Alimony	\$	$\phi$	\$ NA	\$ ( Ø	\$ <sub>\(\)\</sub> \(\) \(\)
Child support	\$	S	\$ NA	\$ $\dot{\varphi}$	s NA

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Retirement (such as social security, pensions, annuities, insurance)	\$ Ø	\$ NIA	\$	Ø	\$ NA
Disability (such as social security, insurance payments)	\$ Í	\$ NIA	\$	Ø	\$ NIA
Unemployment payments	\$ 810.00	\$ ~ [ A	\$ {	2/0.00	\$ NIA
Public-assistance (such as welfare)	\$ Ø	\$ N/4	\$	Ø	\$ NIA
Other (specify):	\$ Ø	\$ MA	\$	ф	\$ Δ۱(Δ
Total monthly income	\$ 810-22	\$ N/A	\$ {	Ho.os	\$ NA

2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
Positive CARE	1702 Histor Rose Pd	mad 2011 - MAR ZOUDE	\$ 2900.00
			\$

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
NIA	NA	WA	\$ N/4
NIA	NIA	NIA	\$ N/A
Alla	NYA	NIA	\$ 0/1

4.	How much cash do you and your spouse have? \$
	Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
Bank of America	ChroKin a	\$ 84.02	\$ N/A
Rank DO Almenia	Savinss	\$ 27.26	\$ N/A
ALA	NA	\$ a.lA	\$ NA

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5.	List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary
	household furnishings.

Assets owned by you or your spouse			
Home (Value)	\$ Bent		
Home (Value)  Other real estate (Value)  NONE	\$ Bent		
Motor vehicle #1 (Value)	\$ \$ 750,00		
Make and year: How 9 1999			
Make and year: How 9, 1999  Model: Arcord			
Motor vehicle #2 (Value)	\$ NIA		
Make and year:			
Model:			
Other assets (Value)	\$ Ø		
Other assets (Value)  Other assets (Value)  Now	\$ \phi		

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse		
NME	s none	s		
Nage	s None	s Ø		
None	\$ Aont	s g		

7. State the persons who rely on you or your spouse for support.

Name (or, if under 18, initials only)	Relationship	Age
Done	NA	NA
Nool	NA	NA
Jane	NA	NIA-

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

	You	Your spouse
Rent or home-mortgage payment (including lot rented for mobile home)  Are real estate taxes included?   Is property insurance included?   Yes   No	\$ 450.00	s NA
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 175.00	s NA
Home maintenance (repairs and upkeep)	s p	s NA
Food	\$ 10000	s N)[\(\D\)
Clothing	s <sub>d</sub>	s
Laundry and dry-cleaning	s $\phi$	s NA
Medical and dental expenses	<b>s</b>	s () / A
Transportation (not including motor vehicle payments)	\$ 27.00	s A) A
Recreation, entertainment, newspapers, magazines, etc.	<b>s</b>	* NA
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's:	<b>s</b> Ø	s N/A
Life:	<b>s</b> $\phi$	s with
Health:	<b>s</b>	s ^) <del> </del>
Motor vehicle:	\$ 75.00	s ald
Other:	<b>s</b> \$\phi\$	s NIA
Taxes (not deducted from wages or included in mortgage payments) (specify):	s Ø	s NIA
Installment payments		
Motor vehicle:	s \$	s NA
Credit card (name):	<b>s</b> Ø	s N)A
Department store (name):	<b>s D</b>	s N/4
Other:	s Ø	s NA
Alimony, maintenance, and support paid to others	s 1111-	s 0/1A

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Regular expenses for operation of business, profession, or farm (attach detailed statement)		\$	φ	S	NA
Other (specify):		\$	Ø	\$	NIA
<del></del>	Total monthly expenses:	\$	827.00	> \$	NA
9.	Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?				
	☐ Yes ☑ No If yes, describe on an attached sheet.				
10.	Have you paid — or will you be paying — an attorney any money for services in connection with this case, including the completion of this form? ☐ Yes ☑ No				
	If yes, how much? \$				
11.	Have you paid — or will you be paying — anyone other than an attorney for services in connection with this case, including the completion of this lf yes, how much? \$			-	ypist) any money ZLNo
12.	Provide any other information that will help explain why you cannot pay  Unemployed at this from Correctly 50	y the costs of these proceedings.  ecking employ ment everyday			
13.	Identify the city and state of your legal residence.				
	Your daytime phone number: $\frac{20-(-9.88-28)}{}$ Your age: $\frac{29}{}$ Your years of schooling: $\frac{1645}{}$ Last four digits of your social-security number: $\frac{939}{}$				